PATENT APPLICATION FEE DETERMINATION RECO								1	Application or Docket Number				
	PATENT	RD	200209180-1										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			23				Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FE	E 375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20≈		* 3			X\$ 9=		OR	X\$18=	SU	
INDEPENDENT CLAIMS			/ minus 3 =		* 3		 	X42=	-	OR	X84=	252	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=			+280≈	426	
* If	the difference	in column 1 is	less than z	ero, enter	"0" in c	n column 2				OR		10.07	
CLAIMS AS AMENDED - PART II								ΓΟΤΑL	L	OR	TOTAL	1056	
						(Column 3)	5	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-		 				
		*					L	+140= TOTAL	<u> </u>	OR	+280=		
							AD	DIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colur		(Column 3)	_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
L	FIRST PRESE	ENTATION OF MI	JETIPLE DE	PENDENT	CLAIM		-	+140=		OR	+280=		
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		 X42=			X84=	<u> </u>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+140= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **TOTAL ADDIT. FEE											<u> </u>		
	The "Highest Nur	mber Previously Pa	id For" (Total o	or Independ	ent) is the	highest numbe	r found	in the ap	opropriate bo	k in co	lumn 1.		